

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN2802	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 02 - STATE BUILDING B. WING: _____	(X3) DATE SURVEY COMPLETED 09/11/2017
NAME OF PROVIDER OR SUPPLIER MEADOWBROOK NURSING CENTER		STREET ADDRESS, CITY, STATE, ZIP CODE 1245 E COLLEGE ST PULASKI, TN 38478		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 831	<p>1200-8-6-.08 (1) Building Standards</p> <p>(1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.</p> <p>This Rule is not met as evidenced by: Based on observations, the facility failed to maintain the overall nursing home environment.</p> <p>The findings included:</p> <p>Observation on 9/11/17 at 9:24 AM-11:27 AM, revealed penetration deficiencies in the following locations:</p> <ul style="list-style-type: none"> a. Electrical room above the door improper fire stop installation. b. Laundry room behind dryers (ceiling blowout patch) c. Above the ceiling by the 200 hall therapy an electrical conduit partially embedded in the wall. d. 1 ceiling blowout patch by the 200 hall therapy. e. 3 wall blowout patches above ceiling by the 200 hall therapy. f. Interview with maintenance director and regional maintenance director confirms (along with inspector observations) that the sprinkler trunk line is penetrating the ceiling and not properly sealed by the 200 hall therapy and throughout the entire facility. g. Above ceiling at the cross corridor fire doors next to the director of nursing is 1 blowout patch and (2 holes in the wall that are exposing metal studs). h. Above ceiling by patient room 107 (cross corridor fire doors) 	N 831	<p>N831</p> <p>1. Maintenance Supervisor contacted 2 companies to do a bid on new sprinkler system installation to allow identified areas to be brought to compliance.</p> <p>2. The sprinkler system improper installation is the area affected by this deficient practice.</p> <p>3. We will be asking for a waiver to make these changes due to the complexity of the repairs to the sprinkler system from Nelson Rodriguez.</p>	

Division of Health Care Facilities
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Jennifer Kaymer

TITLE
Administrator

(X6) DATE

9-29-17

Division of Health Care Facilities

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N 831	<p>Continued From page 1</p> <ul style="list-style-type: none"> - Peeling sheetrock tape (ceiling) - Unsealed penetration (low voltage wire) - Red plastic water line penetration improperly firestopped (mixed) - Blowout patch (wall) i. Improper fire stop application on sprinkler line going through wall above ceiling by room 109. j. Improper fire stop application on sprinkler line going through wall above ceiling by care plan coordination room. k. Blowout patch above ceiling by the 200 hall boiler room. l. Cross corridor fire doors next to the assistant director of nursing above ceiling: <ul style="list-style-type: none"> - 1 inch metal conduit not sealed on the end - ¼ inch pvc (gray) not sealed on the end or correctly at the base. - Blowout patch above fire doors with the width of the corridor. NFPA 101, 8.3.5 (2012 Edition) <p>Maintenance staff was present when these deficiencies were identified and they were later acknowledged by the administrator during the exit conference on 9/11/17.</p>	N 831		